

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT

BAYFIELD COUNTY, WISCONSIN

Not
Entered

RECEIVED
Date Stamp Received
OCT 05 2017



Permit #:	17-0453
Date:	11-9-17
Amount Paid:	351 10-6-17
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

Bayfield Co. Zoning Dept.

TYPE OF PERMIT REQUESTED → <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER							
Owner's Name: <u>LC PROPERTIES</u> <u>GREG WEISS LC</u>	Mailing Address: <u>21746 SISKIWT LAKE RD</u> City/State/Zip: <u>CORUNCUA, WI. 54827</u>	Telephone: <u>715-953-2223</u>					
Address of Property: <u>22475 HWY 13</u>	City/State/Zip: <u>CORUNCUA, WI. 54827</u>	Cell Phone: <u>715-209-6496</u>					
Contractor: <u>T.B.D</u>	Contractor Phone: <u>N/A</u>	Plumber Phone: <u>N/A</u>					
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone: <u>N/A</u>	Agent Mailing Address (include City/State/Zip): <u>715-682-0380</u> <u>803 Lakeshore Dr. Ashland, WI 54806</u>	Written Authorization Attached <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
PROJECT LOCATION: <u>Steve Schrautagel</u>	Tax ID#	Recorded Document: (i.e. Property Ownership)					
1/4, 1/4	Gov't Lot <u>3</u>	Lot(s) CSM <u>1162 1983 11/3534</u>	Lot(s) No. <u>4</u>	Block(s) No.	Subdivision:	Lot Size <u>13,943</u>	Acres <u>.32</u>
Section <u>34</u> , Township <u>51</u> N, Range <u>6</u> W	Town of: <u>BELL</u>	Distance Structure is from Shoreline: <u>1000 +/-</u> feet	Distance Structure is from Shoreline: <u>1000 +/-</u> feet	Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Are Wetlands Present? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
<input checked="" type="checkbox"/> Shoreland →	<input type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? <input type="checkbox"/> If Yes---continue →	<input type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <input type="checkbox"/> If Yes---continue →					
<input type="checkbox"/> Non-Shoreland							

Value at Time of Completion * include donated time & material	Project	# of Stories	Foundation	# of bedrooms	What Type of Sewer/Sanitary System Is on the property?	Water
<u>\$14,720</u> <u>115,000</u> <u>\$117,000 R.R.</u>	<input checked="" type="checkbox"/> New Construction <input checked="" type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input checked="" type="checkbox"/> 2-Story	<input type="checkbox"/> Basement <input type="checkbox"/> Foundation <u>Slab</u>	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input checked="" type="checkbox"/> Municipal/City <input type="checkbox"/> (New) Sanitary <input checked="" type="checkbox"/> Sanitary (Exists) Specify Type: <u>4"</u> <input type="checkbox"/> Privy (Pit) or <input type="checkbox"/> Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/ service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input checked="" type="checkbox"/> City <input type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it)	Length: <u>150'</u>	Width: <u>20'</u>	Height: <u>10'</u>
Proposed Construction:	Length: <u>158'</u>	Width: <u>28'</u>	Height: <u>22'</u>

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input checked="" type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	()	()
	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	()	()
	<input type="checkbox"/> with Loft	()	()
	<input type="checkbox"/> with a Porch	()	()
	<input type="checkbox"/> with (2nd) Porch	()	()
	<input type="checkbox"/> with a Deck	()	()
<input checked="" type="checkbox"/> Commercial Use	<input type="checkbox"/> with Attached Garage	()	()
	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities)	()	()
	<input type="checkbox"/> Mobile Home (manufactured date)	()	()
<input type="checkbox"/> Municipal Use	<input checked="" type="checkbox"/> Addition/Alteration (specify) <u>REMODEL + SECOND STREET ADDITION</u>	()	()
	<input type="checkbox"/> Accessory Building (specify)	()	()
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	()	()
	<input type="checkbox"/> Special Use: (explain)	()	()
	<input type="checkbox"/> Conditional Use: (explain)	()	()
	<input type="checkbox"/> Other: (explain)	()	()

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): (Signature) Date 10/5/17
(If there are Multiple Owners listed on the Deed, All Owners must sign or letter(s) of authorization must accompany this application)
Authorized Agent: (Signature) Date 10/5/17
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)
Address to send permit (Address)
Copy of Tax Statement
Attach
If you recently purchased the property send your Recorded Deed

The box below: Draw or Sketch Your Property (regardless of what you are applying for)

- (1) Show Location of: **Proposed Construction**
(2) Show / Indicate: **North (N) on Plot Plan**
(3) Show Location of (*): **(*) Driveway and (*) Frontage Road (Name Frontage Road)**
(4) Show: **All Existing Structures on your Property**
(5) Show: **(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)**
(6) Show any (*): **(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond**
(7) Show any (*): **(*) Wetlands; or (*) Slopes over 20%**

Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	50 Feet	Setback from the Lake (ordinary high-water mark)	N/A Feet
Setback from the Established Right-of-Way	10 Feet	Setback from the River, Stream, Creek	N/A Feet
		Setback from the Bank or Bluff	N/A Feet
Setback from the North Lot Line	15 Feet		
Setback from the South Lot Line	10 Feet	Setback from Wetland	N/A Feet
Setback from the West Lot Line	10 Feet	20% Slope Area on the property	Yes No
Setback from the East Lot Line	10 Feet	Elevation of Floodplain	N/A Feet
Setback to Septic Tank or Holding Tank	N/A Feet	Setback to Well	N/A Feet
Setback to Drain Field	N/A Feet		
Setback to Privy (Portable, Composting)	N/A Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number:		# of bedrooms:		Sanitary Date:	
Permit Denied (Date):		Reason for Denial:					
Permit #: 17-0453		Permit Date: 11-9-17		Approved by area variance			
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Is Parcel a Sub-Standard Lot		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No (Deed of Record)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Fused/Contiguous Lot(s))		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Mitigation Required	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is Structure Non-Conforming		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Removing 3 Feet		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previously Granted by Variance (B.O.A.)		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Affidavit Required	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Granted by Variance (B.O.A.)		Case #: 100-CON-100-17		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Previously Granted by Variance (B.O.A.)		Case #:	
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was Parcel Legally Created		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was Proposed Building Site Delineated		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Were Property Lines Represented by Owner		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Was Property Surveyed	
Inspection Record:		Inspected by: J. C. Murphy		Zoning District: (C)		Date of Re-Inspection:	
Date of Inspection: 10-17-17		Condition(s): Town, Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No – (if No they need to be attached.)		Lakes Classification: (1. Superstition)			
Signature of Inspector:		Date of Approval: 11-17-17					
Hold For Sanitary: <input type="checkbox"/> _____		Hold For TBA: <input type="checkbox"/> _____		Hold For Affidavit: <input type="checkbox"/> _____		Hold For Fees: <input type="checkbox"/> _____	

any portion of the building w/in the setback shall be removed.



#5781

2016R-566052

PATRICIA A OLSON
BAYFIELD COUNTY, WI
REGISTER OF DEEDS
11/04/2016 12:30PM
TF EXEMPT #:
RECORDING FEE: 30.00
PAGES: 2

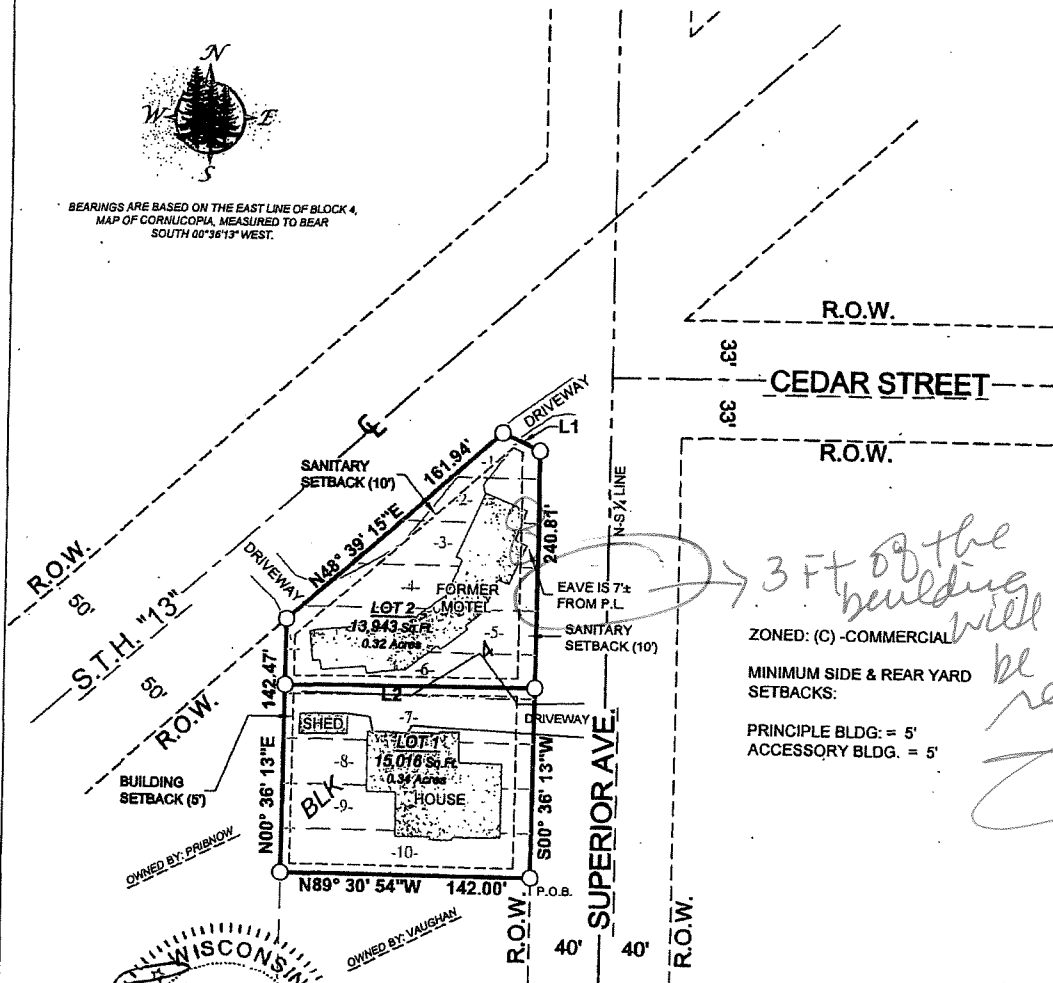
Vol. 11 csm Pg 353-354

BAYFIELD COUNTY CERTIFIED SURVEY MAP NO. 1983

LOTS 1 - 10, BLOCK 4, PLAT OF THE VILLAGE OF CORNUCOPIA,
GOVERNMENT LOT 3, SECTION 34, TOWNSHIP 51 NORTH, RANGE 6 WEST,
TOWN OF BELL, BAYFIELD COUNTY, WI.



BEARINGS ARE BASED ON THE EAST LINE OF BLOCK 4,
MAP OF CORNUCOPIA, MEASURED TO BEAR
SOUTH 60°36'13" WEST.



ZONED: (C) - COMMERCIAL

MINIMUM SIDE & REAR YARD
SETBACKS:PRINCIPLE BLDG. = 5'
ACCESSORY BLDG. = 5'

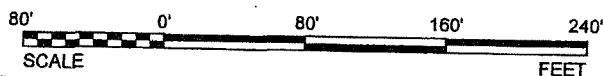
LINE TABLE

LINE	BEARING	DISTANCE
L1	S65°22'16"E	23.61'



LEGEND

- - SET 1 1/4" O.D. IRON PIPE
WEIGHING 1.68 LBS PER LIN. FOOT



Pine Ridge Land Surveying, LLC.

Professional Land Surveying Services

Value & Quality in a Timely Manner

PATRICK A. MCKUEN, PLS

29390 Woodland Rd.
Ashland, Wisconsin

Phone (715) 682-2969

Cell (715) 292-5601

WWW.PINERIDGESURVEYING.COM

PROJECT NO. TAUBERT16-34-51-6

SHEET 1 OF 2 SHEETS

G.L.3

3 Ft of the building will be removed.

353
34-S1-6

City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY – City
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0453** Issued To: **L C Holdings LLC / Steve Schraufnagel, Agent**

Location: - $\frac{1}{4}$ of - $\frac{1}{4}$ Section **34** Township **51** N. Range **6** W. Town of **Bell**

Gov't Lot Lot **2** Block Subdivision CSM# **1983**

For: **Commercial Principal Building Addition: [Remodel & Second Story (155' x 25') (Irregular) = 3,875 sq. ft.]**
(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Any necessary State, Commercial Building permit and inspection shall be obtained and complied with. Structure, including eaves, shall be located at least 10' from the property line (ROW). Any portion of the building within the setback shall be removed.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Jennifer Murphy

Authorized Issuing Official

November 9, 2017

Date